

Revised-

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11/01/2009

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger	\$0	0
Commercial	\$110,760	0
2. Automobile Physical Damage		
Private Passenger	\$0	0
Commercial	\$36,463	0
3. Liability Other Than Auto	\$119,996	0
4. Burglary and Theft	\$0	0
5. Glass	\$0	0
6. Fidelity	\$0	0
7. Surety	\$0	0
8. Boiler and Machinery	\$125	0
9. Fire	\$3761	0
10. Extended Coverage	na	0
11. Inland Marine	\$1,205,294	0
12. Homeowners	\$4,220,430	+11.9%
13. Commercial Multi-Peril	\$6,353,516	0
14. Crop Hail	\$0	0
15. Other <u>Ocean Marine</u>	\$0	0
Line of Insurance		

RECEIVED
SEP 09 2009
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

This filing only applies to buliding forms.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

This filing proposes to revise rates by territory. We are also proposing to increase our water back up deductible from \$2,500 to \$5,000.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

American Automobile Insurance
Company

Name of Company

Michael Horan -
Regulatory Filing Analyst

Official - Title

SUMMARY SHEET

FORM (RF-3)

Change in Company's premium or rate level produced by rate revision
Effective November 1, 2009

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$ 120,960,309	10.8%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		

RECEIVED

OCT 26 2009

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Does filing only apply to certain territory (territories) or certain classes? No
If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory
Organization, specify organization): Revised Maximum Deductible credits; Revised charges for
End. 483, End. 570 & End. 571; Revising charge of Coverage A for Form 6; Revising base rates.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will
result from application of new rates.

AMERICAN FAMILY MUTUAL INS. CO.

Name of Company

James P. Meyer

Official - Title

James P. Meyer, ACP, AIM
Senior Pricing Analyst/Filings

SUMMARY SHEET

FORM (RF-3)

Change in Company's premium or rate level produced by rate revision
Effective November 1, 2009

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners (Mobile)	\$ 1,518,386	9.0%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____		

RECEIVED

OCT 15 2009

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Does filing only apply to certain territory (territories) or certain classes? No
If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory
Organization, specify organization): Rate and Rule Revision, base rate and relativity changes.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will
result from application of new rates.

AMERICAN FAMILY MUTUAL INS. CO.

Name of Company

James P. Meyer

Official - Title

James P. Meyer, ACP, AIM
Senior Pricing Analyst/Filings

mobile home -

Revised-

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11/01/2009

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger	\$0	0
Commercial	\$55,860	0
2. Automobile Physical Damage		
Private Passenger	\$0	0
Commercial	\$4,822	0
3. Liability Other Than Auto	\$3,271,070	0
4. Burglary and Theft	\$0	0
5. Glass	\$0	0
6. Fidelity	\$0	0
7. Surety	\$720	0
8. Boiler and Machinery	\$0	0
9. Fire	\$113,725	0
10. Extended Coverage	na	0
11. Inland Marine	\$610,963	0
12. Homeowners	\$723,053	+13.4%
13. Commercial Multi-Peril	\$4,455,503	0
14. Crop Hail	\$0	0
15. Other <u>Ocean Marine</u>	\$0	0
Line of Insurance		

RECEIVED
SEP 09 2009
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

This filing only applies to buliding forms.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

This filing proposes to revise rates by territory. We are also proposing to increase our water back up deductible from \$2,500 to \$5,000.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

The American Insurance Company
Name of Company

Michael Horan -
Regulatory Filing Analyst
Official - Title

-Revised-

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11/01/2009

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger	\$1,097,819	0
Commercial	\$3,905	0
2. Automobile Physical Damage		
Private Passenger	\$1,022,509	0
Commercial	\$0	0
3. Liability Other Than Auto	\$16,082	0
4. Burglary and Theft	\$0	0
5. Glass	\$0	0
6. Fidelity	\$0	0
7. Surety	\$0	0
8. Boiler and Machinery	\$1,828	0
9. Fire	\$0	0
10. Extended Coverage	na	0
11. Inland Marine	\$1,745,921	0
12. Homeowners	\$3,903,742	+15.8%
13. Commercial Multi-Peril	\$536,002	0
14. Crop Hail	\$0	0
15. Other <u>Ocean Marine</u>	\$0	0
Line of Insurance		

RECEIVED
SEP 09 2009
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

This filing only applies to buliding forms.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

This filing proposes to revise rates by territory. We are also proposing to increase our water back up deductible from \$2,500 to \$5,000.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Associated Indemnity Corporation
Name of Company

Michael Horan -
Regulatory Filing Analyst
Official - Title

H29219D

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 09/01/2009

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	793,740	+9.3%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Dwelling Property</u> Line of Insurance	24,990	-0.1%

RECEIVED

OCT 14 2009

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Does filing only apply to certain territory (territories) or certain classes? If so, specify: Filing applies to all territories and all classes.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): The company is filing a overall rate change of 9.0% for its Homeowners Multiple Peril Line, which includes Homeowners Program and Dwelling Property Program, in Illinois effective September 1, 2009. The premium impact of the filed changes are 9.8% for HO-3 and HO-3 MH, 0.0% for HO-4, and 9.8% for HO-6, which result in an overall rate change of 9.3% for Homeowners Program. The premium impact of this filed change is -0.1% for Dwelling Property Program. The annual premiums submitted are the exact 2008 written premiums. The percent rate change is estimated using the distribution from current book of business. In this rate filing, the filed changes include base rate, form relativities, base rate relativities, and several other rating variables.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

California Casualty Indemnity Exchange

Name of Company

Melodie L. Baird - Assistant Vice President

Official - Title

date okay

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10/16/2009

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$87,599,130	-0.81%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

RECEIVED

OCT 27 2009

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Yes. Apply to 46 zip codes

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Reduce zip code relativities for 46 zip codes.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Farmers Insurance Exchange

Name of Company

Jim Lechner - Product Manager

Official - Title

H29219D

- Revised -

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11/01/2009

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger	\$2,524	0
Commercial	87,347	0
2. Automobile Physical Damage		
Private Passenger	\$320	0
Commercial	\$23,813	0
3. Liability Other Than Auto	\$1,361,847	0
4. Burglary and Theft	\$0	0
5. Glass	\$0	0
6. Fidelity	\$0	0
7. Surety	\$500	0
8. Boiler and Machinery	\$-501	0
9. Fire	\$216,045	0
10. Extended Coverage	na	0
11. Inland Marine	\$4,311,492	0
12. Homeowners	\$1,839,073	+10.7%
13. Commercial Multi-Peril	9,457,171	0
14. Crop Hail	\$7,672,223	0
15. Other <u>Ocean Marine</u>	4,581,916	0
Line of Insurance		

RECEIVED
SEP 09 2009
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

This filing only applies to buliding forms.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

This filing proposes to revise rates by territory. We are also proposing to increase our water back up deductible from \$2,500 to \$5,000.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Fireman's Fund Insurance Company
Name of Company

Michael Horan -
Regulatory Filing Analyst
Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

Summary Sheet (Form RF-3)-IL Homeowners HO-3 Standard Program

Change in Company's premium or rate level produced by rate revision
Effective: New Business 10/01/2009 and Renewal 11/01/2009.

(1)	(2)	(3)
Coverage	Annual Premium Volume (000's) *	Percent Change (+or-) **
1. Automobile Liability Private		
Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	162,848	-12.88%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		

RECEIVED

SEP 11 2009

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Life of Insurance

Does filing only apply to certain territory (territories) or certain
Classes? If so, **No.**
specify:

Brief description of filing. (If filing follows rates of an advisory Organization,
specify organization):

**Made adjustments to Base Rates, Limit factors, and Auto/Home discount. Added
several endorsements.**

**Change in Company's premium level which will result from application of new
rates.

FOUNDERS INSURANCE COMPANY

Name of Company

David Mirza-Vice President

Official – Title

ILLINOIS DEPARTMENT OF INSURANCE

Summary Sheet (Form RF-3)-IL Homeowners **HO-3 Special Program**

Change in Company's premium or rate level produced by rate revision
Effective: New Business 10/01/2009 and Renewal 11/01/2009.

(1) <u>Coverage</u>	(2) Annual Premium Volume (000's) *	(3) Percent Change (+or-) **
1. Automobile Liability Private		
Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	485,874	-8.26%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		

RECEIVED

SEP 11 2009

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Life of Insurance

Does filing only apply to certain territory (territories) or certain
Classes? If so, **No.**
specify:

Brief description of filing. (If filing follows rates of an advisory Organization,
specify organization):

**Made adjustments to Base Rates, Limit factors, and Auto/Home discount. Added
several endorsements.**

**Change in Company's premium level which will result from application of new
rates.

FOUNDERS INSURANCE COMPANY

Name of Company

David Mirza-Vice President

Official – Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

11/15/2009

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$614,554	0.0%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

RECEIVED

SEP 29 2009

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Filing applies to all territories

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Revises lower rate cap from +/-40% to +/- 25%

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Garrison Property And Casualty
Insurance Company
Name of Company

Michael Foley – AVP Insurance
Compliance
Official - Title

H29219D

Form (RF-3)

SUMMARY SHEETChange in Company's premium or rate level produced by rate
revision effective December 1, 2009

(1)	(2)	(3)
<u>Coverage</u>	<u>Annual Premium Volume (Illinois) *</u>	<u>Percent Change (+ or -) **</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	2,440,955	16.4%
13. Commercial Multi-Peril*		
14. Crop Hail		
15. Other		

RECEIVED
OCT 12 2009
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Does filing only apply to certain territory (territories) or certain
classes? If so, specify: NoBrief description of filing. (If filing follows rates of an advisory
organization, specify organization): Revising HO-3 base rates. Multi-Policy Change.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.Grange Mutual Casualty Company
Name of CompanyBrett C. Helf, Product Manager
Official - Title

Form (RF-3)

SUMMARY SHEETChange in Company's premium or rate level produced by rate
revision effective December 1, 2009

(1)	(2)	(3)
<u>Coverage</u>	<u>Annual Premium Volume (Illinois) *</u>	<u>Percent Change (+ or -) **</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	25,869	65.0%
13. Commercial Multi-Peril*		
14. Crop Hail		
15. Other		

RECEIVED

OCT 12 2009

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELDDoes filing only apply to certain territory (territories) or certain
classes? If so, specify: NoBrief description of filing: (If filing follows rates of an advisory
organization, specify organization): Revising base rate.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.Grange Mutual Casualty Company
Name of CompanyBrett C. Helf, Product Manager
Official - Title

mobile Home

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 1/1/2010

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	1,634,764	+11.3%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

RECEIVED

OCT 08 2009

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: This filing affects base rates, the Residential Rental Property
endorsement, and the Business Activities endorsement.

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): GMRC is increasing base liability rates by
12.5%. We are revising the rates for the Residential Rental Property endorsement
(PL 1037). Eligibility for the Business Activities endorsement (PL 1031) is being
extended to allow for gross receipts up to \$40,000. The Home Business section of
the manual is being moved to page HG-R-3 in the Home-Guard manual.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.

Grinnell Mutual Reinsurance Company
Name of Company

Derek Settergren - Assistant Actuary
Official - Title

SUMMARY SHEET

Form (RF-3)

Change in Company's premium or rate level produced by rate revision effective: **12/1/09**

	(1)	(2)	(3)
	<u>Coverage</u>	<u>Annual Premium Volume (Illinois)*</u>	<u>Percent Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary & Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler & Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine _____		
12.	Homeowners	\$3,618,421	+8.85%
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Worker's Compensation		
16.	Other:		

RECEIVED

OCT 14 2009

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Line of Insurance

Does filing only apply to certain territory (territories) or certain classes? NO

If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): **IMT Insurance Company is filing a Homeowners rate change, resulting in an overall rate increase of 8.85%. We are also revising several Financial Responsibility Level Factors, added one new and deleted two duplicate Zip Codes on the State Territory Pages. Included in this filing are revised Rate, Rule and State Territory Pages; comparisons of the old and new manual pages; and a supporting Rate Justification document. We ask that the filing be approved effective December 1, 2009 for new and renewal business.**

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

IMT Insurance Company
Name of Company

Jason Thompson, BA, MA Filing Analyst, Research & Development
Official - Title

- Revised -

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11/01/2009

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger	\$2,615,442	0
Commercial	\$80,919	0
2. Automobile Physical Damage		
Private Passenger	\$2,362,659	0
Commercial	\$9,853	0
3. Liability Other Than Auto	\$5,555,324	0
4. Burglary and Theft	\$0	0
5. Glass	\$0	0
6. Fidelity	\$0	0
7. Surety	\$350	0
8. Boiler and Machinery	\$42,829	0
9. Fire	\$163,151	0
10. Extended Coverage	na	0
11. Inland Marine	\$2,075,767	0
12. Homeowners	\$5,570,767	+16.9%
13. Commercial Multi-Peril	\$7,414,169	0
14. Crop Hail	\$0	0
15. Other <u>Ocean Marine</u>	\$422,137	0
Line of Insurance		

RECEIVED
SEP 09 2009
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

This filing applies to all buliding and contents forms.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

This filing proposes to revise rates by territory. We are also proposing to increase our water back up deductible from \$2,500 to \$5,000.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

National Surety Corporation
Name of Company

Michael Horan -
Regulatory Filing Analyst
Official - Title

H29219D

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

11/15/2009

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$23,174,566	0.0%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

RECEIVED

SEP 29 2009

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Filing applies to all territories

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Revises lower rate cap from +/-40% to +/- 25%

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.United Services Automobile
Association

Name of Company

Michael Foley – AVP Insurance
Compliance

Official - Title

H29219D

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

11/15/2009

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$16,449,887	0.0%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

RECEIVED

SEP 29 2009

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Filing applies to all territories

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Revises lower rate cap from +/- 40% to +/- 25%

* Adjusted to reflect all prior rate changes.Rev

** Change in Company's premium level which will result from application of new rates.

USAA Casualty Insurance Company
Name of Company

Michael Foley – AVP Insurance
Compliance

Official - Title

H29219D

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

11/15/2009

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$242,353	0.0%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

RECEIVED

SEP 29 2009

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Filing applies to all territories

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Revises lower rate cap from +/- 40% to +/- 25%

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

USAA General Indemnity
Company

Name of Company

Michael Foley – AVP Insurance
Compliance

Official - Title

H29219D